

BREMEN PUBLIC SCHOOLS
512 WEST GRANT STREET
BREMEN IN 46506
“AN EQUAL OPPORTUNITY EMPLOYER”

Bremen Public Schools administers post-offer, pre-employment drug tests as a Condition of Employment.

SUBSTITUTE TEACHER APPLICATION

NAME _____ DATE _____

ADDRESS _____
STREET CITY STATE ZIP

TELEPHONE NUMBER _____ SOC SEC # _____

ALTERNATE NUMBER WHERE WE CAN REACH YOU _____

E-MAIL ADDRESS (If available) _____

I am interested in substituting in the following areas:

Elementary/Middle School (grade levels) _____

High School (subject areas) _____

I am available (AM, PM or both) Mon ____ Tue ____ Wed ____ Thu ____ Fri ____

Are you able to start immediately? _____

If you have had experience working with children, indicate where, length of time, etc:

Why are you seeking this type of work? _____

The State of Indiana requires that all substitutes hold either a valid Indiana Teacher's License or a valid Indiana Substitute Teacher's Certificate and provide Limited Criminal History Background information. Do you have one of the above licenses and history information? _____. If so, please attach a copy. If you are currently a licensed teacher, what is your certification area: _____

EDUCATION

| SCHOOL ATTENDED | LOCATION TOWN/CITY/STATE | NO. YEARS ATTENDED | DEGREE | MAJOR |
|-----------------|--------------------------|--------------------|--------|-------|
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TECHNICAL | | | | |
| OTHER | | | | |

EXPERIENCE

List in Chronological Order

| NAME OF EMPLOYER (Company) | CITY AND STATE | PERIOD OF SERVICE (Give exact dates) | TYPE OF WORK | REASON FOR LEAVING |
|----------------------------|----------------|--------------------------------------|--------------|--------------------|
| | | From _____ To _____ | | |
| | | From _____ To _____ | | |
| | | From _____ To _____ | | |

Three references are REQUIRED. Give names and addresses of persons for whom you have worked and are now working. One name may be a personal reference. The complete mailing address MUST be included. All references may be requested to complete a written inquiry.

REFERENCES

| NAME | COMPLETE MAILING ADDRESS, INCLUDING ZIP CODE | RELATION TO YOUR WORK |
|------|--|-----------------------|
| | | |
| | | |
| | | |
| | | |

I certify that the facts in this application are true and complete.

Signed _____ Date _____

Comments:

**BREMEN PUBLIC SCHOOLS
REQUEST FOR BACKGROUND INFORMATION**

Dear Applicant:

Jobs with Bremen Public Schools involve contact with our student population. We ask that you complete the questions below to help us evaluate your suitability to work with these students. All applications for employment are expected to provide us with this information; you are not being singled out for closer inspection. This insert is part of the Application itself and any misrepresentation or omission of facts may be grounds for disqualification from further consideration or for termination from employment regardless of when the misrepresentation or omission is discovered.

The conviction of a crime or any affirmative answer provided by you on this insert is not an automatic bar to employment. The Corporation will consider the nature of any conviction or alleged conduct underlying the affirmative response, the date of the alleged conduct in question, your intervening conduct and the relationship between the offense or alleged conduct underlying the affirmative response and the position for which you are applying.

1. If you are now working, is your conduct as an employee or the quality of work the focus of any investigation by your current employer? Yes ___ No ___ If yes, explain the circumstances on a separate sheet and attach it to this application.
2. Have you ever resigned from a job after being disciplined by your employer or after being offered the opportunity to resign rather than be terminate? Yes ___ No ___ If Yes, explain the circumstances on a separate sheet of paper and attach it to this application.
3. Have you ever been investigated for, charged with or pleaded guilty or "no contest" to any crime involving the sexual abuse of any person or indecency with a minor? Yes ___ No ___ If Yes, explain the circumstances on a separate sheet and attach it to this application.
4. Have you ever been charged with a crime, other than a minor traffic offense, where the court has deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program? Yes ___ No ___ If yes, explain the circumstances on a separate sheet and attach it to this application.

AUTHORIZATION AND RELEASE

I authorize the School Corporation to check my employment history, including without limitation, reference checks, and to seek the release of investigatory information, including a "limited criminal history" possessed by any private or public employer or any local, state or federal agency. I authorize these private or public employees or local, state, or federal agencies to provide the School Corporation any information they may release concerning the matter described herein, and I will cooperate to the extent necessary to obtain the release of this information.

I EXPRESSLY WAIVE IN CONNECTION WITH ANY REQUEST FOR, OR PROVISION OF SUCH INFORMATION, ANY CLAIMS OR CAUSES OF ACTION, INCLUDING WITHOUT LIMITATION, DEFAMATION, INFLICTION OF EMOTIONAL DISTRESS, INVASION OF PRIVACY OR INTERFERENCE WITH CONTRACTUAL RELATIONS THAT I MIGHT OTHERWISE HAVE AGAINST THE SCHOOL CORPORATION, ITS OFFICIALS, EMPLOYEES, TRUSTEES OR AGENTS, OR AGAINST ANY PROVIDER OF SUCH INFORMATION.

I HAVE READ THIS AUTHORIZATION AND RELEASE OF ALL CLAIMS AND I EXPRESSLEY AGREE TO THE TERMS SET OUT HEREIN.

SIGNATURE _____ DATE _____

Print Your Name